



5400 Bowman Road Macon, GA 31210
Tel: 478-475-6900 Fax: 478-475-6906

www.ingramentities.com

Application for Business Credit Account

Legal Name of Company		Accounts Payable Contact
Doing Business As or Trade Name		Telephone
Physical Location Address		Fax
City	State	Zip + 4
Mobile		
Purchase Order Required Yes ___ No ___	Federal ID Number (EIN) or (SSN)	Email Address
Purchase for Resale Yes ___ No ___	Sales Tax Exemption Number (Attach Copy of GA DOR ST-5 Form)	Website

Organizational Structure
 ___ Proprietorship ___ C-Corp ___ S-Corp ___ LLC ___ Partnership ___ Non-Profit
 ___ Govt. Franchise? ___ Business Start Date ___/___/___ State of Organization ___

Anticipated Purchase Volume (\$/Month)	Annual Gross Sales \$	Avg. Number of Employees
Banking Reference	Mailing Address	City, State & Zip
Contact Name	Email Address	Tel: Fax:
Trade Reference #1	Mailing Address	City, State & Zip
Contact Name	Email Address	Tel: Fax:
Trade Reference #2	Mailing Address	City, State & Zip
Contact Name	Email Address	Tel: Fax:



5400 Bowman Road Macon, GA 31210
Tel: 478-475-6900 Fax: 478-475-6906
www.ingramentities.com

Application for Business Credit Account

Personal Guarantee

This section must be completed if your company:

- **Has Less than \$1 million in annual sales or revenues, OR**
- **Is less than 1 year old, OR**
- **Is a Partnership, Sole Proprietorship, Professional Corporation or is unincorporated.**

Federal law requires us to obtain, verify and record information that identifies each person who opens an account in order to help the government fight the funding of terrorism and money laundering activities. To process the application with your personal guarantee, we must have your name, street address, date of birth and other identifying information, and we may ask for identifying documents from you as well.

First Name	Middle	Last Name	Date of Birth
Street Address (No PO Boxes)			Social Security Number
City	State	Zip Code	Home Telephone
<p>I agree to be liable for any unpaid amounts on this account. I authorize Ingram Entities, Inc. to investigate my personal credit and my financial records, including my banking records. I understand that Ingram Entities, Inc. or its agent may request my personal credit bureau report in considering, and for the purpose of an update renewal, extension of credit, review or collection of this account.</p> <p>In consideration of Ingram Entities, Inc. extending credit to applicant in order to make purchases under the terms of Ingram Entities, Incorporated's Business Credit Policy as attached herewith, I agree to personally guarantee payment of the debt, including any reasonable attorney's fees, arbitration, court or other collection costs as permitted by law and as incurred. In the event of any default I agree that Ingram Entities, Inc. can enforce this guarantee, without first proceeding against the applicant, until the governing account has been terminated and all amounts due have been paid. I waive all notice regarding the governing account and this guarantee. I agree to guarantee payment even if the terms of the governing account are changed. I understand that any negative information including failure to make required payments on the Account may be reported to the appropriate reporting agency.</p>			
Signature of Personal Guarantor		Printed Name of Personal Guarantor	Date



5400 Bowman Road Macon, GA 31210
Tel: 478-475-6900 Fax: 478-475-6906

www.ingramentities.com

Application for Business Credit Account

Billing Information (If Different)

Attention		Dept.	Billing Phone
Billing Address		Bldg / Suite	Billing Fax
City	State	Zip Code	Contact Hours

Required Signature

IMPORTANT: Application will not be processed without signature and all fields completed.

By signing below, you certify that you have read and agree to the Ingram Entities, Incorporated Business Credit Account Policy which is attached. You also agree to be bound by these terms and conditions and you agree to pay all charges incurred under such terms. You further certify that all of the information provided in this application is true and correct and that you are authorized to sign this application on behalf of the applicant.

Signature of Authorized Officer / Owner / Managing Partner		Date
Please Print Name	Please Print Title	

Privacy Notice

Ingram Entities Incorporated values your privacy and we want to assure you that your personal information is kept completely confidential by us. We adhere to the highest level of professional ethical responsibility and obligations to protect the confidentiality of all client information. In order to evaluate your request for a Business Credit Account we collect various types of personal information from you and about you from other sources including banks, trade account references, credit reporting agencies, the internet and documents obtained from you or others. Such information includes your name, address, telephone numbers, social security number, employer identification number, sales tax number, personal and/or business financial information, banking information, credit history and vendor credit references. If you contact us by email we may save and print your emails and any of our responses to you by email. If we receive information from you when your browser interacts with our website we may receive and retain information which may include information transmitted by internet "cookies", passwords used to access our website, your preferences on the site and your internet service provider's address. We DO NOT share any personal information about you with anyone without your express written consent, except as permitted by law and as described below. The law permits or requires disclosure in certain instances, such as if we must share information to protect against fraud, in response to a court subpoena, or as part of actual or threatened legal proceedings or alternate dispute resolution. Your personal information is provided to only those employees as necessary to review, establish, maintain, renew, update, terminate or deny your request for a Business Credit Account with Ingram Entities, Inc.



5400 Bowman Road Macon, GA 31210
Tel: 478-475-6900 Fax: 478-475-6906

www.ingramentities.com

Application for Business Credit Account

Terms & Conditions

All Ingram Entities, Inc. products and services are offered for sale subject to the terms and conditions specified herein which may not be altered unless agreed to by Ingram Entities, Inc. in writing. The customer is deemed to have accepted these TERMS AND CONDITIONS when an order is placed. Please note that these TERMS AND CONDITIONS along with those stated in the Ingram Entities, Inc. Business Credit Account Policy represent all that are applicable for products and services offered for sale by Ingram Entities, Inc. No other terms or conditions, written or verbal, including those found on Purchase Orders prepared by our customers, supersedes or may be added to those found in this credit policy.

Due to frequent changes in fuel and agricultural commodity prices, our quoted prices are subject to change without notice.	Any invoice 30 days of age, is automatically placed on CREDIT DELAY. Any existing or further orders must be prepaid or paid COD per order shipped until past due invoices are cleared up.
Prices quoted are valid only if all materials listed are ordered at one time, delivered to one location and at one time.	Any invoice 60 days of age, is automatically placed on CREDIT HOLD. Any existing orders will not be released and new orders will not be accepted until delinquent invoices are cleared up.
Unless denoted otherwise on our invoice, payment for purchases made on account is on the terms of 2%-Net 10 Days, or Net 30 days.	CREDIT REVOKED - After 90 days, credit privileges are revoked. No orders will be filled until all past due and delinquent invoices are cleared up.
No returns shall be accepted unless previously authorized, in writing, by Ingram Entities, Inc.	All delinquencies over 90 days will be reported to credit bureaus.
Returns may be subject to freight, handling and restocking charges.	Interest charges will be assessed on all invoices not paid within the specified terms at a rate of 1.5% per month or an annual rate of eighteen percent (18%).
Cancellation of any order, once placed with and accepted by Ingram Entities, Inc. can be made only with Ingram Entities, Inc.'s written consent, and upon terms that will indemnify Ingram Entities, Inc. against loss.	Customers will be liable for any court costs, attorney's fees and legal expenses associated with collection of delinquent invoices.
An authorized signature from the customer's firm is required on all packing slips or bills of lading.	A thirty nine dollar (\$39.00) charge will be assessed for all checks returned for "Not Sufficient Funds" (NSF).
No credit shall be issued to any customer without a completed and signed Application for Business Credit Account. Ingram Entities, Inc. reserves the right to cancel credit extension to any customer for any reason without notice.	Receipt of a second returned check will cause account to be placed on a "Cash In Advance" status.



5400 Bowman Road Macon, GA 31210
Tel: 478-475-6900 Fax: 478-475-6906

www.ingramentities.com

Application for Business Credit Account

APPLICATION INSTRUCTIONS

Your Application for Business Credit Account is provided in the preceding pages. After completion, please detach the application portion and send it to:

Ingram Entities, Inc.
5400 Bowman Road
Macon, GA 31210

If you prefer, you may fax your application to us at (478) 475-6906.

Please detach and keep a copy of this CREDIT POLICY and TERMS AND CONDITIONS for your reference.

If you have any questions while filling out the application or inquiries regarding an existing open account, please call (478) 475-6900, Controller's office extension, between the hours of 8:30 AM and 5:30 PM, Monday through Friday.

Please fill out the application completely. A complete application will reduce the time it takes to approve your account. It usually takes 5 business days, upon receipt of your completed application, to approve credit and set up your account. You will be notified by mail when your account has been approved and your credit limit has been established.

If the products we provide to you will be exempt from state sales tax, you must enter your state sales tax exemption number on your application and send us a copy of your tax exemption certificate.

When completing the trade reference section, please use as references those companies which are of a like nature to your operations as Ingram Entities, Inc.

We hope you will take advantage of the quality products and services we offer. We look forward to working with you!